## SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF PLACER

ATTORNEY OR UNREPRESENTED PARTY	FOR COURT USE ONLY
(Name, State Bar number, and Address):	
TELEPHONE NO.:	
FAX NO.:	
EMAIL ADDRESS:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF PLACER	1
11270 B AVENUE	
AUBURN, CALIFORNIA 95603 APPELLATE DIVISION	
APPELLANT:	1
RESPONDENT:	
PROPOSED STATEMENT ON APPEAL (INFRACTION)	CASE NUMBER:
I,, submit this	s proposed statement on appeal
pursuant to California Rules of Court, Rule 8.916 and declare as follows:	
Trial in this matter was held on	
The following is a brief description of what occurred at the trial:	
<u></u>	
☐ Number of additional pages attached	
I declare under the penalty of perjury of the laws of the State of California theorrect.	hat the foregoing is true and
DATE:	
PRINTED NAME	SIGNATURE